

● **PRINTER RUSH** ● (PTO ASSISTANCE)

*Query Check
(E-File)*

Application : <u>10/081974</u>	Examiner : <u>McIntosh, T</u>	GAU : <u>1623</u>
From: <u>SPC</u>	Location: IDC <u>FMP</u> FDC	Date: <u>9/20/05</u>
Tracking #: _____		Week Date: _____

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
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<input type="checkbox"/> IIFW	_____	<input checked="" type="checkbox"/> <u>Fees</u>
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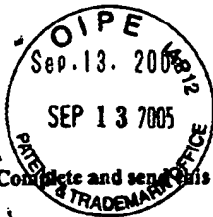
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Danna Lee Hengst (Depositor's name)
Danna Lee Hengst (Signature)
9/13/2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/081,974	02/21/2002	Joseph Rubinfeld	12636-263	2253

TITLE OF INVENTION: SEQUENTIAL THERAPY COMPRISING A 20(S)-CAMPTOTHECIN AND A PYRIMIDINE BASE ANALOG

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	no	\$1400.00	\$300	\$1700.00	09/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MCINTOSH III, TRAVISS C	1623	514-050000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

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(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Shirley Chen
2. Wilson Sonsini
3. Goodrich & Rosati

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Super Gen, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

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☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Shirley Chen, Ph.D.

Date

9/13/2005

Typed or printed name

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44,608

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PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033

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01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8001 30.00 DA

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